

# Employee Pack



*WorkReady* is a voluntary program designed to make sure Australia Post employees who report a work-related injury or illness receive early, quality medical treatment and a safe transition back into the workforce, with suitable work restrictions, as soon as medically possible.

This pack contains:

- ▶ *WorkReady* Program Introduction
- ▶ Employee, Manager and Medical Practitioner Responsibilities
- ▶ Frequently Asked Questions
- ▶ *WorkReady* Forms
  - ▶ Introduction Letter to Doctor
  - ▶ *WorkReady* Report – Certificate of Physical Capacity



# Welcome to Your *WorkReady* Program Pack

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Australia Post employees who report a work-related injury or illness have access to the *WorkReady* program, offering early, quality medical treatment and suitable work restrictions. The aim is to enable you to transition back into the workforce safely with meaningful duties as soon as medically possible.

*WorkReady* is based on best practice injury management principles. Medical research shows that early return into the workplace results in a quicker and greater level of recovery. The program also aims to prevent aggravation of injuries and help maintain a connection with work.

*WorkReady* was developed in consultation with our principal unions, is part of the Fair Work Agreement and is voluntary for all employees.

You can decide for yourself whether to participate and have access to the following benefits of the program:

- ▶ Up to four treatment sessions by a nominated independent *WorkReady* Medical Practitioner (WRMP);
- ▶ Up to four physiotherapy treatment sessions with nominated service providers; and
- ▶ Cost of x-rays (to confirm/eliminate fractures), tetanus injections and basic medication recommended by the WRMP.

The cost of these benefits will be met by Australia Post.

We have established a network of independent *WorkReady* Medical Practitioners and physiotherapists who are familiar with Australia Post work facilities and the duties performed by employees. This network means you will usually receive quality medical treatment on the same day that a work related injury or illness is reported.

This pack contains detailed instructions on how to use the program and what to do if you would prefer to see your own treating doctor outside of the *WorkReady* Program.

All information generated by the program will be retained confidentially and will not be used for any other purpose. It should be noted that Australia Post is able to request an employee's medical records under Section 58 of the Safety and Rehabilitation Act where they lodge a claim for workers compensation.

Further information concerning the program including the responsibilities of employees, managers and medical practitioners can be obtained from your manager or on Postnet.



## Employees

In the event of an injury, you are required to report your injury to your supervisor as a matter of priority and complete an Incident Form. If you choose to participate in the WorkReady Program (WRP) voluntarily you are required to:

- Attend the WorkReady Medical Practitioner (WRMP) medical examination at the earliest available time;
- Provide the WRMP with full details of the circumstances in which the reported injury was sustained;
- Consider the content of the WorkReady Report and contact your manager/supervisor to discuss;
- Discuss with your supervisor what duties you are capable of performing; and
- Commence the return to duties in accordance with WorkReady Report as discussed with your manager/supervisor.

If you choose to see your own doctor you are required to:

- Report your injury to your supervisor as a priority and complete the Incident Form;

- Advise your supervisor as soon as practicable that you will not be participating in the WRP;
- Obtain a WRP Pack from your supervisor relevant to your job;
- Make an appointment with your own doctor;
- Provide your doctor with full details of how the injury was sustained and request your doctor complete the WorkReady Report;
- Ensure that the completed WorkReady Report is immediately supplied to your supervisor. Alternatively, you can fax from any official Australia Post site or have the doctor forward the WorkReady Report by email or fax;
- Discuss with your supervisor what duties you are capable of performing; and
- Commence the return to duties in accordance with WorkReady Report as discussed with your manager/supervisor.

In some cases the rehabilitation area may assist in developing return to work duties. Employees must immediately contact their supervisor if they require assistance with any step of the WRP process.

## Managers

When an employee reports a work related injury, the workplace manager/supervisor is to provide the employee with an Incident Form and assistance completing the form. If the employee elects to voluntarily participate in the WRP, the manager/supervisor is required to:

- Provide employees with WRP documentation and make them aware of the requirements of the WRP, their rights and responsibilities;
- Reinforce the voluntary aspect of the program;
- In consultation with employees make the appointment arrangements with the WRMP, provide the WRMP with a referral, provide employee with appointment letter and WorkReady Pack;
- Where required, assist the employee to attend the WRMP medical appointment and provide interpreter assistance;
- Upon receipt of the WorkReady Report provided by the WRMP, consider whether duties are available consistent with any medical restrictions outlined;
- Discuss with the employee what duties they are physically capable of performing;
- Seek assistance from the rehabilitation area or from your HR business partner in cases where this is required;

- Coordinate the employees return to safe and meaningful duties in accordance with the WorkReady Report;
- Monitor employee progress and provide support to the employee and other relevant personnel while the injury and restricted capacity to work continues;
- Maintain appropriate record notation in each case;
- Maintain all WRP documentation in accordance with privacy requirements and do not release for any purpose other than the WRP except with written authority of employee; and
- Managers and supervisors are required to supply WRP packs, and if necessary workers' compensation claim packs, to employees upon request. WRP packs are also available via the Australia Post internet and intranet sites and employees can download directly from those sites. Employees may also seek WRP packs from any official Australia Post facility. Managers must provide packs to any employee on request.

Where the employee chooses to be examined by their own doctor, managers must provide them with a WorkReady Pack for their role, with work centre contact details included. The employee will arrange an appointment with their doctor and then provide the WorkReady Report to their supervisor for consideration in the same way a report from a WRMP occurs.

## Medical Practitioners

WorkReady Medical Practitioners (WRMP) who examine Australia Post employees under the WRP are required to:

- Explain the purpose of the examination and how information will be used;
- If the employee agrees, treat the injuries sustained by the employee and make any necessary referrals (eg x-rays) or prescribe basic medication;
- Discuss with the employee their job with Australia Post and how the injuries occurred;
- Familiarise themselves with the job tasks and the suitable duties that Australia Post can provide for the job the employee performs. This information will be provided with the referral from the workplace or by the employee;
- Discuss with the employee what duties they are capable of performing if they were to return to work on alternative/modified duties;

- Where necessary discuss with the workplace manager/supervisor any queries concerning the duties that can be provided;
- Complete the WRMP report outlining the duties the employee can perform, the duration of the report and all other relevant information;
- Provide a copy of the WRMP report to the employee, the workplace and the WRP co-ordinator; and
- Make a follow up appointment and continue treatment where necessary.

In some cases Australia Post's rehabilitation area will provide assistance in the development of return to work duties and a formal rehabilitation program may be developed. In these cases the WorkReady Medical Practitioner may be contacted by the rehabilitation case manager or program provider to assist with the program.

# Frequently Asked Questions

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## 1. For what type of injury/illness can I participate in the *WorkReady* Program?

The *WorkReady* Program only applies to reported work related injuries or illnesses. The program does not apply to non-work related conditions including colds, influenza and viral illnesses.

## 2. Do I have to be examined by a *WorkReady* doctor?

Participation in the *WorkReady* Program is voluntary and employees must decide whether they want to be examined by a *WorkReady* Medical Practitioner or their own treating doctor.

## 3. Can I see my own doctor?

Yes you can and you will need to ask your doctor to complete the *WorkReady* Program Report.

## 4. When can I be required to attend for a fitness for duty assessment by an Australia Post *WorkReady* Medical Practitioner under Australia Post's *WorkReady* Program?

Where your doctor does not complete the *WorkReady* Program Report, Australia Post may need to ascertain or confirm your fitness to continue working or return to work safely.

## 5. Who will conduct the examination?

A *WorkReady* Medical Practitioner who is experienced in work-related injuries and illnesses and familiar with the duties undertaken by Australia Post facilities will conduct the examination and provide an independent assessment of your work capacity.

## 6. What is the role of Australia Post's *WorkReady* Medical Practitioner?

Where you voluntarily decide to see a *WorkReady* Medical Practitioner they will provide treatment of your injury/illness and make any necessary referrals such as x-rays covered by the provisions of the *WorkReady* Program to help you return to work safely as soon as medically possible.

*WorkReady* Medical Practitioners are not empowered to provide Australia Post with employee confidential medical information, other than the information required on the *WorkReady* Report, unless authorised in writing by the employee or required by legislation. Management representatives are not to request such information. It should be noted that Australia Post is able to request an employee's medical records under Section 58 of the Safety and Rehabilitation Act where they lodge a claim for workers compensation.

## 7. Who arranges the appointment?

Your supervisor or manager will arrange the appointment, as soon as is practicable, and you will be advised of the details in writing prior to attending the appointment.

## 8. Will it cost me anything?

Australia Post will pay for the examination by the *WorkReady* Medical Practitioner. Reasonable travel costs will be paid where the round trip for medical treatment provided by *WorkReady* Medical Practitioner exceeds 50kms. Reasonable travel costs for attendance at fitness for duty examinations will be paid as per Australia Post's Travelling Allowance provisions.

## 9. What if I don't speak English very well?

You can request through your supervisor or manager that an interpreter attends the appointment or you may bring a person who can assist in this regard.

**10. What happens at the consultation?**

The *WorkReady* Medical Practitioner will explain the purpose and nature of the assessment and obtain your agreement before undertaking any physical examination.

**11. What if further tests are required?**

If the *WorkReady* Medical Practitioner feels that further tests are required or has a concern regarding your injury or illness, he or she will contact your treating doctor to inform the doctor of this opinion. If you have chosen to participate in the *WorkReady* Program voluntarily for treatment and you do not have a treating doctor the *WorkReady* Medical Practitioner will arrange the other tests or referrals that are within the scope of the *WorkReady* Program.

**12. What if I require medication for the treatment of my injury?**

If you require basic medication for the treatment of your reported work related injury or illness the *WorkReady* Medical Practitioner will discuss this with you and indicate your requirements on the *WorkReady* Report. Australia Post will pay for basic medication indicated by the *WorkReady* Medical Practitioner where receipts are provided. This will include anti-inflammatory, medication, pain killers, antiseptic creams or tetanus injections.

**13. Who has access to my report?**

The *WorkReady* Medical Practitioner will provide you with a copy of the *WorkReady* Report. A copy will also be provided to your management representative and the *WorkReady* Program Co-ordinator. There are strict rules regarding your privacy and both Australia Post personnel and the *WorkReady* Medical Practitioner must observe these rules. If you submit a workers' compensation claim under the provisions of the Safety, Rehabilitation and Compensation Act 1988, any doctors who have treated or examined you may be requested to provide a report to a workers' compensation delegate where you have given authority for this to occur.

**14. What if I am unhappy about the examination or process?**

It is important that you report this to your manager/supervisor as soon as possible so they can initiate investigation through relevant personnel.

**15. If my doctor ticks options on the suitable duties guide are they the only duties I should perform?**

No, the guide is only a guide and your manager's job is to find duties, including those noted from the guide, within the overall medical restrictions noted by your doctor on the *WorkReady* Report.

## WorkReady Forms

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You will need the following pages when you visit your doctor.

▶ Introduction Letter to Doctor

Please fill in the details at the top of the page and hand this letter to your doctor.

▶ WorkReady Report – Certificate of Physical Capacity

Ask your doctor to complete this form, fax a copy to the WorkReady Co-ordinator and give the signed original back to you. Then immediately supply the form to your supervisor.

## Introduction Letter to Doctor

Date:        /        /

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Work Centre:

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Manager:

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Phone Number:

Fax Number:

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Dear Doctor,

Re: Employee:

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Thank you for seeing our employee, who has chosen to attend your medical clinic for the management of their injury.

In line with best practice, Australia Post is committed to providing injured employees with suitable duties within any medical restrictions that enable a safe, timely and durable return to work after injury or illness.

As you are aware, research overwhelmingly shows that time off work, particularly if it is prolonged, can lead to adverse physical, psychological, social and financial effects, which worsen with each passing day. Health outcomes are much improved if injured employees can remain at work during recovery.

Your completion of the attached *WorkReady* Report is the first part of the return to work process. Associated with this report is a *Suitable Duties Guide* which provides an overview of some of the more common suitable duties which Australia Post will make available when required. Please note that some activities performed must be performed at allocated rates of completion. Please indicate in the comments section of the certificate the current rate and the suggested rate for the activity. Please provide activity recommendations based on the injured employee's functional capacity (what they can do), functional limitations (what they can't do) and medically based restrictions (what you don't want them to do).

Australia Post has internal rehabilitation staff that can liaise with injured employees and managers to assist both you and other health care professionals to ensure that the work undertaken is suitable and safe.

Communication between all parties can greatly assist recovery and return to work after injury. Feel confident to communicate by phone, meet for a case conference or visit the work site to obtain knowledge of the work performed, clarify restrictions and review suitable duties.

An Australia Post Manager from the facility where your patient works is always available to discuss any concerns or questions you may have with regards to availability of suitable duties, so please do not hesitate to contact him/her to discuss. Where the details are not provided above, the employee will advise you of the Manager's telephone number.

Yours faithfully,

Australia Post

# WorkReady Report – Certificate of Physical Capacity



Employee Name: \_\_\_\_\_ APS Number: \_\_\_\_\_

Work Centre: \_\_\_\_\_ DOB:     /     /     Date of Injury:     /     /

Diagnosis: \_\_\_\_\_

**The patient described the condition as caused by:**  
\_\_\_\_\_  
\_\_\_\_\_

**Duties:** I confirm that I have reviewed the duties information in the **Suitable Duties Guide**      Yes      No

**Activity recommendations:**

Please tick applicable (i.e. 1 box each line)  
If no box is ticked, this will be taken as NO restriction for this action or not applicable.

Related to presenting injury, the worker can:	Not restricted	Perform occasionally (<33%)	Perform seldom (<10%)	Unable to perform
Sit	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Stand	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Walk	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Climb (ladder / stairs)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Twist	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Bend / stoop	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Squat / kneel	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Work above shoulders (L, R, B)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Keyboard (L, R, B)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Grasp (forceful) (L, R, B)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Fine manipulation (L, R, B)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Push / Pull	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Lift / Carry	<input type="checkbox"/>	<input type="checkbox"/> _____kg	<input type="checkbox"/> _____kg	<input type="checkbox"/>
Drive motor vehicle / van	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ride motorcycle (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Drive Truck (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Ride bicycle (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Operate a forklift (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

**Additional comments:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Fitness for work:**

(including overtime)  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please note:** Australia Post should be able to provide duties if any of the above are ticked as suitable.

**Treatment, investigation and referrals:**

**Duration of this report from:**     /     /     **to:**     /     /     (inclusive)      Tick if final certificate

**OR:** Having assessed the employee against the above activities I certify him/her unfit for all duties above from:     /     /     to:     /     /

**In your opinion, the worker's employment is a contributing factor to this injury:**      Yes      No      Unsure

**Pre-existing or other possible contributing factors?**  
\_\_\_\_\_  
\_\_\_\_\_

**Doctors name:** (Please print) \_\_\_\_\_ **Stamp:** \_\_\_\_\_ **Telephone:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date of consultation:**     /     /

**PLEASE FAX THIS REPORT TO THE EMPLOYEE'S MANAGER AND PROVIDE SIGNED ORIGINAL TO EMPLOYEE**